STATE OF MAINE



COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

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STATEMENT OF SOURCES OF INCOME 1 M.R.S.A. §§ 1016-A et seg.

COVERING THE CALENDAR YEAR JANUARY 1, 2006 THROUGH DECEMBER 31, 2006

FULL NAME: Glenn Cummings	Please check the appropriate box and fill in the District number.
MAILING ADDRESS: 24 Nevins Street	me District number.
CITY: Portland, ME	Member of the Senate, District
ZIP CODE: 04103	· · · · · · · · · · · · · · · · · · ·
PHONE NUMBER: 775 - 2560	Member of the House, District 115

GENERAL INSTRUCTIONS

1. Please file this statement with the Clerk of the House or the Secretary of the Senate by:

5:00 p.m. on February 15, 2007.

- 2. The report covers you, your spouse, and your dependent children.
- 3. Report only specific sources of income. Dollar amounts need not be listed.
- 4. Campaign contributions duly recorded as required by law need not be reported in this statement.
- 5. Attach additional sheets if needed. Label attachments with your name, address, and the date.
- Please sign on Page 4.

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- 7. The completed statements will be posted as a 'pdf' on the Commission's website.
- 8. State law (1 M.R.S.A. § 1018) requires Legislators to file an updated statement with the Commission within 30 days of any change to the information relating to the preceding year. Additionally, the law (1 M.R.S.A. § 1016-B (2)) requires Legislators to make a supplementary statement to the Commission of any reportable liability within 30 days after it is incurred.

PLEASE KEEP A COPY OF THIS STATEMENT FOR YOUR FILES.	
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Disclosure statements are made available to members of the public upon request.

Thank you for your cooperation.

PART I. INCOME DERIVED FROM EMPLOYMENT BY ANOTHER. Name each employer from whom you received compensation of \$1,000 or more. Specify also the principal type of economic activity of each employer.

Name of Employer	<u>Address</u>		<u>pe of Есолошіс</u> <u>rf Employer</u>
Southern Maine Comm	unity College 2 Fort Rd, South Por	-Hland ME	Higher Education
	04106		
,	•	1 101 1 101 1	
Enter the name and addre	ED FROM SELF-EMPLOYMENT. (For Legss of your business, if any, and list the major are happened association, a partnership, firm, professional association, a centity.	eas of economic acti	vity from which you deri
Name and Address of Business Entity	Major Areas of Economic Activity (self)		of Economic Activity pointion or similar business entity
	N/A		
· · · · · · · · · · · · · · · · · · ·	-		·
		U-11,	10-
Name each source of inco \$1,000, whichever is great	me derived from self-employment that representer, and specify the principal type of economic	activity of the entity	or person from whom yo
Name each source of inco \$1,000, whichever is great derived such income. If the	me derived from self-employment that represer	activity of the entity , or an established co n from whom the inc <u>Principal Type</u> of Entity or	or person from whom you
Name each source of inco \$1,000, whichever is great derived such income. If the specify only the principal Name of Source	me derived from self-employment that represerter, and specify the principal type of economic his form of disclosure is prohibited by law, rule type of economic activity of the entity or person Address	activity of the entity , or an established co n from whom the inc <u>Principal Type</u> of Entity or	or person from whom you de of professional ethics ome was derived. of Economic Activity r Person Who Is the
Name each source of inco \$1,000, whichever is great derived such income. If the specify only the principal Name of Source	me derived from self-employment that represerter, and specify the principal type of economic his form of disclosure is prohibited by law, rule type of economic activity of the entity or person Address	activity of the entity , or an established co n from whom the inc <u>Principal Type</u> of Entity or	or person from whom you de of professional ethics ome was derived. of Economic Activity r Person Who Is the
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Name each source of inco \$1,000, whichever is great derived such income. If the specify only the principal Name of Source RT III. MAJOR AREAS Of tice. If associated with a law Name and Address of Firm	me derived from self-employment that representer, and specify the principal type of economic his form of disclosure is prohibited by law, rule type of economic activity of the entity or person Address Address N/A OF PRACTICE. (For Legislators who are attack firm, list the major areas of practice of your firm, list the major areas of Practice (self)	activity of the entity, or an established con from whom the incontrol Type of Entity of Sour	or person from whom you de of professional ethics ome was derived. e of Economic Activity Person Who Is the rece of Income List your major areas of Areas of Practice (firm)

PART IV. OTHER SOURCES OF INCOME. Name each source of income of \$1,000 or more not listed in Parts I, II, or III of this form. Do not include gifts. If none, so state.

Name of Source	Address	Kind of Income
1. Capital Portfolio - Vanguara 1	Mut. Funds	Investment
2. Exxon - Mebile		
1. Various other Stocks	131	Invertment
PART V. DISCLOSURE OF REP \$3,000 or more that you received during not list loans from a relative. If none, s	ng the reporting period, and list the major	names of creditors for any unsecured loans of areas of economic activity of each creditor. Do
Name of Creditor	Address of Creditor	Principal Type of Economic Activity of Creditor
1	N/A	
aggregate value of more than \$300 from 1. Chess Board from Const. Craire likely under a		
	NORARIA. List the source of any ho	onoraria accepted for appearances or speeches
	3	
	4	
ou represented or assisted others for co	BEFORE STATE AGENCIES. Identification of any amount. If none, so s	fy each executive branch agency before which tate.

]	2.	
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PART X. INCOME RECEIVED 1	BY MEMBERS OF IMMEDIATE	FAMILY.
List the type of economic activity repchild(ren) during the reporting period income received by spouse and (D) be	l and the kind of income represented	\$1,000 or more received by your spouse or dependent. Do not include gifts. Indicate (S) beside sources of dependent(s).
Type of Economic Activity Representing Each Source of		
Income Received		Kind of Income
1. Education Services (tead	chen, administrator) (s)	Employment
2		
3		
4		
•		
	•	
**	**************************	**************************************
appears that a Legislator has we Attorney General. If the Communication or has willfully filed a statement or has willfully filed a statement on every question and subtranch of the Legislature, and subtranch of the Legislature.	illfully filed a false statement, pission determines that a Legis a false statement, the Legislate shall be precluded from voting shall not attempt to influence to ired statement is subject to a c	rime. If the Commission concludes that it it shall refer its findings of fact to the slator has willfully failed to file a required or shall be presumed to have a conflict of on any question in committee or in either the outcome of any question. A Legislator fivil penalty not to exceed \$1,000, payable to
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Signature